

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	7/8	70881	9/9
O.I.P.E. CLASSIFIER		3: 70946	9/14/99
FORMALITY REVIEW	7/10/3	70946	9-20-99

CM 71632  
INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	9/9
2	✓	✓	9/14
3	✓	✓	9/14
4	✓	✓	9/14
5	✓	✓	9/14
6	✓	✓	9/14
7	✓	✓	9/14
8	✓	✓	9/14
9	✓	✓	9/14
10	✓	✓	9/14
11	✓	✓	9/14
12	✓	✓	9/14
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If more than 150 claims or 10 actions  
 staple additional sheet here

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